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| 022844 | 7590 08/2: | i/2009 | Pee(s) I ransmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission. | | | | | | |
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| -SOUTHFELD, MI-48075-1238 Dearborn, M | | | 18126 | | | | | (Depositor's name) | |
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| | | | | | | | | (Date) | |
| APPLICATION NO. | FILING DATE | FILING DATE | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. | |
| 10/710,459 | | Kevin Ellwood | | | 81100289 4458 | | | | |
| TITLE OF INVENTION OXIDE FUEL CELLS | : APPARATUS AND) | METHOD FOR CONT | ROLLING KINETIC R | ATE | S FOR INTERNAL | L REFO | DRMING OF FUEL IN | SOLID | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE | DUE | PREV. PAID ISSU | E FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1510 | \$300 | | \$0 | | \$1810 | 11/25/2009 | |
| EXAMINER | | ART UNIT | CLASS-SUBCLAS | s |] | | | | |
| WILLS, MONIQUE M 1795 | | | 429-017000 | 429-017000 | | | | | |
| Change of corresponds CFR 1.363). | | 2. For printing on the patent front page, list Damian Porcari | | | | | | | |
| Change of corresponded Address form PTO/SE | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 Brooks Kushman P.C. | | | | | | | | |
| "Fee Address" indi PTO/SB/47; Rev 03-0 Number is required. | registered attorne | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3 | | | | | | | |
| 3. ASSIGNEE NAME A | ND RESIDENCE DATA | A TO BE PRINTED O | N THE PATENT (print | or typ |)e) | | | | |
| PLEASE NOTE: Unl recordation as set forth | ess an assignee is ident in 37 CFR 3.11. Com | ified below, no assign pletion of this form is I | ee data will appear on NOT a substitute for filit | the p | atent. If an assign assignment. | ee is id | entified below, the do | cument has been filed fo | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | | |
| Ford Moto | Dearborn, | Dearborn, MI | | | | | | | |
| Please check the appropri | ate assignee category or | categories (will not be | printed on the patent): | | Individual 🖾 Co | orporati | on or other private gro | up entity 🚨 Governmen | |
| 4a. The following fee(s) | are submitted: | | 4b. Payment of Fee(s): | (Plea | ise first reapply a | ny prev | lously paid issue fee s | hown above) | |
| ☑ Issue Fee | | | A check is enclosed. | | | | | | |
| Publication Fee (No small entity discount permitted) | | | Payment by credit card, Form PTO-2038 is attached. | | | | | | |
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| 5. Change in Entity Stat | | | | | | | | | |
| | s SMALL ENTITY state | | | | | | TTY status. See 37 CF | | |
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| Authorized Signature | Jung! | Hand | | | Date | 100 | . / a) 200 54,615 | 9 | |
| Typed or printed name | Junor Hang | | | | | | | | |
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